



**KIRTLAND YOUTH
ASSOCIATION, INC.**

**SUMMER YOUTH PROGRAM
REGISTRATION FORM
2024**

FULL PAYMENT IS DUE AT THE TIME OF REGISTRATION

Please complete the following information (PRINT)

Child's Name:

Gender: Male Female

Nationality (Optional):

Student's Age:

Child's Date of Birth:

Name of Parent(s)/Guardian(s):

Mailing Address:

Residency: Kirtland Fruitland Upper Fruitland Ojo Amarillo Nenahnezad

Waterflow Shiprock Farmington Other:

Home Phone Number: Work Number:

Cell Number: Email:

Note: If any of the above information changes, please notify the KYA office immediately.

EMERGENCY CONTACT INFORMATION

List two emergency contacts other than those listed above:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	Relationship	Home Phone	Work Phone

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name	Relationship	Home Phone	Work Phone

Medical Problems/Allergies:

<input type="text"/>
<input type="text"/>

EMERGENCY MEDICAL RELEASE

Suppose emergency medical care is deemed necessary and I cannot be reached. In that case, I authorize the Kirtland Youth Association to act on my behalf to grant permission for my child to receive emergency medical treatment.

Parent/Legal Guardian Signature

Date

Summer Program will run from June 3rd - July 26th.

- There is a registration fee of \$300.00 per child. Payment must be made before participation can begin. **The \$300.00 fee is assessed regardless of the number of days the child attends, and there is no refund for days missed.**
- No transportation is provided to and from KYA, but we will pick up summer-school students from Judy Nelson Elementary, Kirtland Middle School, and San Juan College West.
- Our hours of operation are from 7:30 A.M. until 6:00 P.M. Monday through Friday (Closed Thursday, July 4th, and Friday, July 5th).
- Pick-up time is 6:00 PM! If your child is picked up late, you'll be assessed a fee of \$15.00 per thirty minutes.
- The Free Lunch Program will provide breakfast and lunch.
- No snacks ARE NOT provided, but your child may bring snacks, and KYA has a concession stand.
- Please remember that the KYA Summer Program is not a babysitting service. Children are here to interact with other children and participate in all activities scheduled.
- Electronic devices and toys are discouraged, but if they bring them for free time, KYA is not responsible for lost or stolen items.
- **If the participant attains FOUR Discipline Referral Forms, it means immediate dismissal from the program with NO REFUND. The participants will read and sign the CODE OF CONDUCT.**

HOLD HARMLESS RELEASE

I hereby waive, release, absolve, indemnify, and agree to hold harmless the Kirtland Youth Association, Inc., its directors, officers, organizers, sponsors, supervisory staff, participants, and any other affiliates for, from, and against all liability because of any bodily injury, or property damage, known or unknown, which may occur or result from the participation of he/she child mentioned earlier in any activities whether the result of negligence or for any other cause of the Kirtland Youth Association, I individually, and as a parent/guardian for my child, have read this release and understood all the terms. I execute it voluntarily and with full knowledge of its significance.

Release made this _____ of _____, 2024 by _____
Day Month Parent/Guardian Signature

CODE OF CONDUCT

Positive attitudes keep the Summer Program fun and safe. Participant expectations are:

- Listen and follow directions of KYA staff
- Keep your hands and feet to yourself (No hitting/fighting)
- Inappropriate language is prohibited
- Eat and drink in designated areas
- If you make a mess, you clean it up
- No throwing rocks at any location
- Be respectful of other members and their property
- Tobacco, drugs, alcohol, and weapons are prohibited
- Take care of the KYA facility, grounds, and equipment
- Bullying will have serious consequences

Consequences:

- Verbal Warning, unless deemed severe. (Documented)
- Referral Write-Up (Documented)
- Lose privileges of special field trips/activities
- FOUR Disciplinary Write-Ups will cause immediate dismissal of the remainder of the program with no refund.

Child's Signature

Date

AUTHORIZATION TO PRODUCE AND USE AUDIOVISUAL MATERIALS

I hereby voluntarily and without compensation authorize the Kirtland Youth Association, Inc. to produce photographs, movies, videotapes, audiotapes, and PowerPoint Presentations of the student named below. This authorization is given on the condition that the materials taken or produced will be used for community education or program promotion. I understand Kirtland Youth Association, Inc. and its employees will not use these materials for compensation.

I understand that this grant of permission shall only be revoked by a written instrument delivered to the Executive Director of the Kirtland Youth Association, Inc. This consent shall remain in effect unless revoked.

Name of Student

Name of Parent/Legal Guardian

Date

Signature of Parent/Legal Guardian

SWIMMING PROGRAM RELEASE FORM

As the parent/guardian of _____, I agree to allow my child to participate in the Kirtland Youth Association's Summer Swimming Program offered as part of the KYA's Summer Program. I hereby waive, release, absolve, indemnify, and agree to hold harmless the Kirtland Youth Association, Inc., its directors, officers, organizers, sponsors, supervision staff, participants, and any other affiliates, the Central Consolidated School District #22, and the City of Farmington Aquatics Center; for, from, and against all liability because of any bodily injury, or property damage, known or unknown, which might occur or result from the participation of the child mentioned earlier in all swimming activities whether the result of negligence or for any other cause of the Kirtland Youth Association. I, individually and as a parent/guardian for my child, have read this release and understood all the terms. I execute it voluntarily and with full knowledge of its significance.

Release made this _____ **of** _____ **, 2024 by** _____
Day Month Parent/Guardian Signature

CHECK-OUT AUTHORIZATION FORM

Child's Name: _____

The following individuals are authorized to check out the child named above from all KYA activities.

1. Name: _____

Relationship: _____

2. Name: _____

Relationship: _____

3. Name: _____

Relationship: _____

4. Name: _____

Relationship: _____

5. Name: _____

Relationship: _____

Note: Add additional names if needed.

Please note if anyone is PROHIBITED from contacting or checking out your child. Specify the individual(s) below:

Name: _____

Relationship: _____

Name: _____

Relationship: _____

Parent/Guardian Signature: _____ **Date:** _____